HOPWA SERVICE FIELDS IN CAREWARE

Tenant Based Rental Assistance

H TBRA Enrollment – *Required for all TBRA clients enrolled during the contract year*

       Had contact with Primary Health Provider (yes/no)
       Has accessed Insurance or Assistance (yes/no)
       Has Consistent Case Management Contact (yes/no)
       Has Housing Plan (yes/no)
       Obtained income producing job from HOPWA effort (yes/no)
       Percent median income
       Qualified sources of income (yes/no)
       Pre-Enrollment Housing Situation
       HUD defined chronically homeless? (yes/no)

H TBRA Update – *One entry per TBRA payment made (e.g. rent)*

       Housing service type - REQUIRED
       *Had contact with Primary Health Provider (yes/no)
       *Has accessed Insurance or Assistance (yes/no)
       *Has Consistent Case Management Contact (yes/no)
       *Has Housing Plan (yes/no)
       *Obtained income producing job from HOPWA effort (yes/no)
       *Percent median income
       *Qualified sources of income (yes/no)
       *HUD defined chronically homeless? (yes/no)

H TBRA Exit – *Required for any client disenrolled from TBRA during the contract year*

       Non-STRMU Exit Outcome

*Required only if info has changed since the Enrollment service

Short Term Rent, Mortgage, & Utility

H STRMU Enrollment – *Required for all STRMU clients at the beginning of each STRMU year*

        Had contact with Primary Health Provider (yes/no)
        Has accessed Insurance or Assistance (yes/no)
        Has Consistent Case Management Contact (yes/no)
        Has Housing Plan (yes/no)
        Obtained income producing job from HOPWA effort (yes/no)
        Percent median income
        Qualified sources of income (yes/no)
        Pre-Enrollment Housing Situation
        HUD defined chronically homeless? (yes/no)

H STRMU Update – *One entry per STRMU payment made (e.g. rent)*

        Housing service type - REQUIRED
        *Had contact with Primary Health Provider (yes/no)
        *Has accessed Insurance or Assistance (yes/no)
        *Has Consistent Case Management Contact (yes/no)
        *Has Housing Plan (yes/no)
        *Obtained income producing job from HOPWA effort (yes/no)
        *Percent median income
        *Qualified sources of income (yes/no)
        *HUD defined chronically homeless? (yes/no)

H STRMU Exit – *Required for ALL STRMU clients by the end of each STRMU year*

        STRMU Exit Outcome

*Required only if info has changed since the Enrollment service

Permanent Facility

H Permanent Facility Enrollment – *Required for all PF clients enrolled during the contract year*
        Had contact with Primary Health Provider (yes/no)
        Has accessed Insurance or Assistance (yes/no)
        Has Consistent Case Management Contact (yes/no)
        Has Housing Plan (yes/no)
        Obtained income producing job from HOPWA effort (yes/no)
        Percent median income
        Qualified sources of income (yes/no)
        Pre-Enrollment Housing Situation
        HUD defined chronically homeless? (yes/no)

H Permanent Facility Update – *One entry per PF payment*
        *Had contact with Primary Health Provider (yes/no)
        *Has accessed Insurance or Assistance (yes/no)
        *Has Consistent Case Management Contact (yes/no)
        *Has Housing Plan (yes/no)
        *Obtained income producing job from HOPWA effort (yes/no)
        *Percent median income
        *Qualified sources of income (yes/no)
        **HUD defined chronically homeless? (yes/no)

H Permanent Facility Exit – *Required for any client disenrolled from PF during the contract year*
        Non-STRMU Exit Outcome

*Required only if info has changed since the Enrollment service

HOPWA Permanent Housing Placement – *One entry per PHP service or payment*

        Had contact with Primary Health Provider (yes/no)

        Has accessed Insurance or Assistance (yes/no)

        Has Consistent Case Management Contact (yes/no)

        Has Housing Plan (yes/no)

        Obtained income producing job from HOPWA effort (yes/no)

        Percent median income

        Qualified sources of income (yes/no)

        Pre-Enrollment Housing Situation

        HUD defined chronically homeless? (yes/no)

*Required only if info has changed since the Enrollment service